GAS SAFETY CERTIFICATE

This form can be used as a Landlord's gas safety certificate

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ENGIE

Gas Safe REGISTER 57456

Enter Company Registration Number

Engineer [redacted]

Gas Safe

Engie Office Address
UOS ACCOMMODATION
EDGELEE AVENUE
SLOUGH
SL0 3EA

Contract Number UOS
Customer Name ENGIE
Site Address EDGELEE VILLAGE
EDGELEE AVENUE
SLOUGH
Postcode SL0 3EA
Received By Signature

Landlords Details If Different
Name
Address
Postcode
Rented Accommodation YES/NO

App	Landlords appliance Yes/No	Service Inspection Repair	Appliance Details: Location	Type	Model	Serial Number	Burner Manufacturer	Flue Type (OF/RS/FL)
1	YES	SERVICE	EDGELEE VILLAGE PLANT ROOM	BOILER	STORK E6000FAME 6237	0063BS3840	-	OF
2	YES	SERVICE		BOILER	STORK R307	02072L3008	-	OF
3								
4								

General Safety Checks	Result	General Safety Checks	Result
Gas booster/compressor operating correctly (Yes /No/NA)	NA	Flue termination satisfactory (Yes/No/NA)	YES
Is there a current gas installation line diagram at primary meter (Yes/No/NA)	YES	Has a tightness test been carried out from local isolation valve (Yes/No/NA)	YES
Is the meter installation correct (Yes/No)	YES	Is gas pipework electrically bonded (Yes/No)	YES
Gas Installation pipework adequately supported (Yes/No)	YES	Are adequate emergency isolation valves fitted (Yes/No)	YES
Gas Installation pipework sleeved and sealed as appropriate (Yes/No)	YES	Are emergency valve handles in place and labelled (Yes/No)	YES
Is gas pipework colour coded or identified (Yes/No/NA)	YES	Do valves fail to the correct position (Yes/No)	YES
Is flue system installed in accordance with standards (Yes/No)	YES	Area clear of combustible materials (Yes/No)	YES

Ventilation

Low level free area cm² ~~or ventilation flow rate l/sec m³/hr~~	Actual 4000	Required (Calculated)	3186
High level free area cm² ~~or ventilation flow rate extract m³/h~~	Actual 16 000	Required (Calculated)	1593
All ventilation grills clear and unobstructed (Yes/No) YES		Fans and/or flue interlocks operating correctly (Yes/No/NA)	NA

Details of any faults	Remedial Action Taken	Comments and calculations

Appliance Checks	~~App 1 or~~ App 1 High	~~App 2 or~~ App 1 Low	~~App 3 or~~ App 2 High	~~App 4 or~~ App 2 Low
Flue flow test satisfactory (Yes/No/NA)	YES	YES	YES	YES
Spillage test satisfactory (Yes/No/NA)	YES	YES	YES	YES
Air/Gas switch operating correctly (Yes/No/NA)	NA	NA	NA	NA
Flame proving devices operating correctly (Yes/No/NA)	YES	YES	YES	YES
Burner lock out time (seconds)	142	142	140	140
Temperature and limit thermostats operating correctly (Yes/No)	YES	YES	YES	YES
Heat net input rating data (kW)	242	NA	289	NA

	~~App 1 or~~ App 1 High	~~App 2 or~~ App 1 Low	~~App 3 or~~ App 2 High	~~App 4 or~~ App 2 Low
Gas burner pressure (mbar) or heat input kW/h required	242	NA	289	NA
Gas burner pressure (mbar) or heat input kW/h measured	NA	NA	NA	NA
Gas rating measured (kW/h / NA)	NA	NA	NA	NA
Air/gas ratio control setting (%/NA)	NA	NA	NA	NA
Net flue gas temperature (gross less ambient) (°C)	86	89	68	60
Oxygen (O_2 %)	3.2	4.0	3.6	4.5
Carbon Monoxide (CO)(ppm)	7	6	15	12

	~~App 1 or~~ App 1 High	~~App 2 or~~ App 1 Low	~~App 3 or~~ App 2 High	~~App 4 or~~ App 2 Low
Carbon Dioxide (CO_2) (%)	10.1	9.6	9.8	9.2
Excess Air (%)	18.0	23.9	20.7	28.3
CO/CO_2 Ratio	0.0001	0.0001	0.0002	0.0001
Gross Efficiency (%)	99.7	99.6	98.6	98.8
CO flue dilution (ppm)	NA	NA	NA	NA
Standing pressure (mbar)	21.0	21.0	21.0	21.0
Working pressure (mbar)	18.0	20.2	18.0	19.8
Is appliance safe for use (Yes/No)	YES	YES	YES	YES
Has a warning advice notice been raised (No or Warning notice Ser No or No's)	NO			
Test Instrument	TESTO 5PM7 4300			
Test Instrument serial number	4300JOE5390			

Worksheet No (if used)	26506292
Checked by (office use)	
Entered on database	YES

Declaration of gas safety - I confirm that all of the above work described on this form has been satisfactorily completed in accordance with the current Gas Safety (installation and use) regulations, standards and procedures.

Date	26/6/20
Signature	[redacted]

...omer, Yellow - Service Centre, Pink - Site, Gre... Engineer